AMENDED RETURN [

## INH 302

Signature of Personal Representative

Signature of Preparer

RV-R0001702

## **INSTRUCTIONS**

- 1. GENERAL FILING REQUIREMENT: The Tennessee Inheritance Tax is a tax upon the privilege of receiving property by transfer because of a decedent's death. The personal representative, or person(s) in possession of property of the decedent is required to file a return of the estate with the Department of Revenue.
- 2. FILING THE SHORT FORM: If the gross estate of a resident decedent is less than the single exemption allowed by T.C.A. Section 67-8-316, the representative of the estate may file the Short Form-Inheritance Tax Return. In the case of resident decedent's dying between January 1, 1990 and June 30, 1998 the allowable exemption is \$600,000; from July 1, 1998 to December 31, 1998 the allowable exemption is \$625,000; in 1999 the allowable exemption is \$650,000; in 2000 and 2001 the allowable exemption is \$675,000; in 2002 and 2003 the allowable exemption is \$700,000; in 2004 the allowable exemption is \$850,000; in 2005 the allowable exemption is \$950,000; in 2006 and thereafter the allowable exemption is \$1,000,000.
- 3. DUE DATE: The return is due nine (9) months after the date of the decedent's death, unless an extension of time is granted by the Department.
- 4. FILING: Mail the return to Tennessee Department of Revenue, Andrew Jackson State Office Building, 500 Deaderick Street, Nashville, TN 37242.
- 5. FOR ASSISTANCE: Contact Taxpayer Services Division by calling in-state toll free 1-800-342-1003 or (615) 253-0600. Social Security No. \_\_\_\_\_ Name of Decedent (deceased person) \_\_\_\_ Age of Decedent \_\_\_\_ County of Residence \_\_\_ Date of Death\_ Yes No (If Yes, attach a copy to the return). If spouse is deceased, enter Name\_\_\_\_\_ and Date of Death \_\_\_\_\_ Personal Representative's Name (executor, etc.)\_\_\_\_\_ Address (street, city, state, zip code) Preparer of Return\_\_\_ Address (street, city, state, zip code)\_\_\_\_\_ Attorney Representing Estate— Address (street, city, state, zip code) **DOLLARS** CENTS 1. Real Estate (Total from Schedule A, reverse side) ...... 2. Personal and Miscellaneous Property (Total from Schedule B, reverse side) ...... 3. Jointly-Owned Property (Total from Schedule C, reverse side) ...... Transfers during decedent's life (Total from Schedule D, reverse side) ...... 5. Total Gross Estate (Add lines 1 through 4) 6. Allowable Exemption ...... IF THE GROSS ESTATE (Line 5 above) IS LESS THAN THE EXEMPTION TOTAL (Line 6 above), YOU MAY USE THIS SHORT FORM. 8. TOTAL DEDUCTIONS (from Schedule E) ..... 9. NET ESTATE (subtract Line 8 from Line 7) ...... Under penalties of perjury, I declare this report to be true, accurate, and complete to the best of my knowledge. FOR OFFICE USE ONLY

Acct. No.

Date

Date Received

h  or Value of assets 6 months after date of death  SCHEDULE B - PERSONAL & MISC. PROPERTY	daka as da 🗀 🗀		
SCHEDULE B - PERSONAL & MISC. PROPERTY	Jate of death 📙	/alue of assets at	Date of Valuation of assets (check one):
			SCHEDULE A - REAL ES
Notes, Mortgages, Life Insurance, Stocks, Bonds, Annuities, Furnishings,		nessee	Individually owned and located in Te
Automobiles, Jewelry, etc. Owned Individually		•	
on Full Value	Description	Full Value	Description & Location
AL (enter on front, Line 2) \$	11 TOTAL (e	\$	10. TOTAL (enter on front, Line 1)
(C)	11. 1017.12 (0	Ψ	10. TOTAL (enter of front, Line 1)
OWNED PROPERTY			
	ld jointly by decede	st property interest he	
Full Value			Description
			40. T. I. ID V. I
			12. Total Property Value
\$	13. One-half (½) of Line 12		
OWNED PROPERTY	JOINTLY OV	LE C (PART 2)	SCHEE
nd persons other than spouse	y decedent and pe	interests held jointly b	
er Full Value Owned by Decedent	of Joint Owner	Name	Description % owned by Decedent
			14. Total Property Value
\$			15. Total of lines 13 & 14 (enter on front, Line 3)
NG DECEDENT'S LIFE	EDS DIIDING	ED TDANSEI	SCHED
years prior to date of death			
	Date of Gift		Description of Transfer To Whom (no
			16. Total Gifts
		ove gifts)	17. Gift Tax Paid (enter total of State Gift Tax paid on
\$			18. Total of lines 16 & 17 (enter on front, Line 4)
	E DEDUICE:	2011501115	
	E - DEDUCT		Type manager from a val 9 by vial a via a manager advantative a via
sional fees (attorney, accountant, etc.) taxes (property, individual, etc.), notes paid at date of death), bequests (public, charitable, religious, & educational),			
· · · · · · · · · · · · · · · · · · ·			marital deductions (list all property passing to spouse),
•			- · · ·
. Amount			Description